

ST. THOMAS SCHOOL, SAHIBABAD

Sector- IV, Lajpat Nagar, Sahibabad, Ghaziabad- 201005 (U.P.)

Phone : 0120-2630677, 2631336

Email : stssahibabad@gmail.com

Website : www.stthomasghaziabad.org

Form No.....



PHOTO

(Recent Photograph
to be affixed)

APPLICATION FOR EMPLOYMENT [Non-Teaching]

(Please read the instructions given on the last page **before filling this form**)

Post Applied For	Date of Application	Reference/ Advertisement
.....
1. Name:		
2. Father's / Husband's Name:		
3. Age & Date of Birth		
..... (Age)		
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4. Nationality :		
5. Religion :		
6. AADHAR NO :		
7. Blood Group :		
8. Place of Birth :		
9. Present Address:		
10. Permanent Address :		
Pincode:		
Pincode :		
11. Phone No. (Resi):		
12. Mobile:		
13. Email:		
14. Father's/ Husband's Occupation :		
Office Address :		
Email :		
Ph :		
15. Marital Status : Unmarried / Married/ Widowed/Divorced/Seperated		
16. Details of Physical Ailments , If any :		

17. Write Two Physical Identification Marks :

- i.
- ii.

EDUCATION AND EXPERIENCE

18. Languages known :

Can Read & Write
Can Speak
Can Understand

19. Qualifications (Beginning with High School/ Secondary examination).

<i>Exam Passed</i>		<i>Year of Passing</i>	<i>School/College</i>	<i>Board / University</i>	<i>Main Subjects</i>	<i>Division / %</i>
	<i>Regular or Correspondence</i>					

20. Experience:

Name of the Institutions Served	From	To	Nature of Work/ Post	Detail

21. Details of Administrative Experience, If any (Use separate sheet if space is insufficient):

22. Give details of Hobbies, Games/ Co- curricular activities.

GENERAL

23. Reasons for applying in St.Thomas School.

24. Reasons, if any, for leaving the present/previous job.

25. Salary & Allowances last drawn (*Attach Pay Slip/ Certificate*):

Basic Pay :..... Grade Pay:..... Allowances :..... Total :.....

26. Total Salary Expected :

Rs..... (Rupees.....)

27. How much Notice period is required for joining, if selected.

28. Give name, address and phone number of two references.

1.

2.

29. Do you have any other source of income? If so, give details.

30. Do you own any property? If so, give details.

31. Do you pay Income Tax? If so, give details.

Permanent Account No. (PAN) :

Place of Assessment :

32. Have you ever been involved in any Criminal/ Civil case or Law Suit? If so, give details.

33. Are you presently under any obligation of :

(a) Any Court?

(b) Any Legal Bond?

34. Are you a member of any Civil, Professional or Political organization? If yes, give details.

Name of Organization

Position/ Office held

35. Are you related to any present employee or member of management of this Institution? If yes, give details.

36. Number and Details of Certificates/ Mark sheets attached.

DECLARATION

I hereby certify that particulars furnished above are correct to the best of my knowledge and belief. I have not concealed any information likely to impair my fitness for employment. If it is revealed later that I have given false details or concealed material information, my service shall be liable to termination without any notice or compensation.

Place:.....

Date :.....

Signature of the Applicant

INSTRUCTIONS

* **Note:** (Please read the instructions given below before filling the Application Form.)

1. Self-attested copies of the Degrees/Certificates/Testimonial, Residence Proof should be attached with this Application Form.
2. Only short listed candidates will be called for the interview. No TA/DA will be paid to the applicant to appear for the interview.
3. Duly filled Application Form should be sent through Registered Post/Courier or by hand to **“The Chairman/Principal, St. Thomas School, Sector- IV, Lajpat Nagar, Sahibabad, Ghaziabad- 201005, (U.P.)”**. **Superscribe the envelope with school’s name.**
4. Particulars filled by the candidate should be in accordance with the documents submitted. In case of married female candidates, A copy of Marriage Certificate or Affidavit / Voter I-Card (proof stating the change of Name after marriage) should be attached. Any change in Name will not be entertained in the later stage.

FOR OFFICE USE ONLY

Form No:.....

Receipt No:.....

Date:.....

(Authorized Signatory)